

# WATER WELL REPORT

Application No.

32/01E-3F

STATE OF WASHINGTON

Permit No. 51-22778

City SE 11

(1) OWNER: Name CITY OF OAK HARBOR Address 3075-3RD AVE W. OAK HARBOR W.N. 98277

(2) LOCATION OF WELL: County ISLAND SE 1/4 NW 1/4 Sec. 3 T. 32 N. R. 16 W.M.  
Bearing and distance from section or subdivision corner 730' W & 200' N OF CTR OF SEC 3.

(3) PROPOSED USE: Domestic ☐ Industrial ☐ Municipal ☒  
Irrigation ☐ Test Well ☐ Other ☐

(4) TYPE OF WORK: Owner's number of well # 11  
(if more than one).....  
New well ☒ Method: Dug ☐ Bored ☐  
Deepened ☐ Cable ☒ Driven ☐  
Reconditioned ☐ Rotary ☐ Jetted ☐

(5) DIMENSIONS: Diameter of well 8 inches.  
Drilled 255 ft. Depth of completed well 245 ft.

(6) CONSTRUCTION DETAILS:  
Casing installed: 8" Diam. from 0 ft. to 210 ft.  
Threaded ☐ " Diam. from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
Welded ☒ " Diam. from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
Perforations: Yes ☐ No ☒  
Type of perforator used \_\_\_\_\_  
SIZE of perforations \_\_\_\_\_ in. by \_\_\_\_\_ in.  
\_\_\_\_\_ perforations from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
\_\_\_\_\_ perforations from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
\_\_\_\_\_ perforations from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
Screens: Yes ☒ No ☐  
Manufacturer's Name JOHNSON  
Type STAINLESS Model No. 304  
Diam. 8 Slot size 1/2 from 210 ft. to 215 ft.  
Diam. 8 Slot size 1/2 from 215 ft. to 225 ft.  
8 225 - 245  
Gravel packed: Yes ☐ No ☒ Size of gravel: \_\_\_\_\_  
Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
Surface seal: Yes ☒ No ☐ To what depth? 26 ft. ft.  
Material used in seal BENTONITE  
Did any strata contain unusable water? Yes ☐ No ☒  
Type of water? \_\_\_\_\_ Depth of strata \_\_\_\_\_  
Method of sealing strata off \_\_\_\_\_

(7) PUMP: Manufacturer's Name \_\_\_\_\_  
Type: \_\_\_\_\_ HP

(8) WATER LEVELS: Land-surface elevation \_\_\_\_\_ ft.  
above mean sea level, \_\_\_\_\_ ft. below top of well Date NOV 77  
Static level 165 ft. below top of well Date NOV 77  
Artesian pressure \_\_\_\_\_ lbs. per square inch Date \_\_\_\_\_  
Artesian water is controlled by \_\_\_\_\_ (Cap. valve, etc.)

(9) WELL TESTS: Drawdown is amount water level is lowered below static level  
Was a pump test made? Yes ☒ No ☐ If yes, by whom? DRILLER  
Yield: 175 gal./min. with 41 ft. drawdown after 4 hrs.  
" 175 " 41 " 6 "  
" 175 " 41+ " 12 "  
Recovery data (time taken as zero when pump turned off) (water level measured from well top to water level)  
Time Water Level Time Water Level  
2 min 1 1/2' FROM SL 5 min 1' FROM SL  
10 min 6" FROM SL SL  
Date of test NOV 77 - 11/9/77  
Bailer test 2.0 gal./min. with 5 ft. drawdown after 4 hrs.  
Artesian flow \_\_\_\_\_ g.p.m. Date \_\_\_\_\_  
Temperature of water \_\_\_\_\_ Was a chemical analysis made? Yes ☒ No ☐

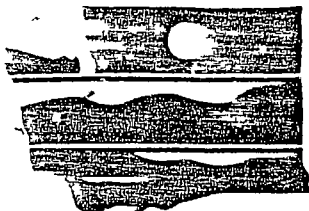
(10) WELL LOG:  
Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.

MATERIAL	FROM	TO
FILL DIRT	0	5
HARD PAN (GRAY)	5	36
SANDY HARD	36	45
DIRTY BROWN SAND	45	62
CLAY (GRAY)	62	74
SANDY CLAY	74	95
DIRTY SAND	95	132
SANDY CLAY	132	158
DIRTY SAND	158	174
WATER SAND FINE	174	186
GRAY CLAY	186	189
SANDY CLAY	189	193
WATER SAND (DIRTY)	193	200
WATER SAND #12	200	215
WATER SAND #10	215	225
WATER SAND #8 (FINE)	225	255

175 GPM. From 206  
(MAX 180 GPM)

Work started OCT, 19 77 Completed NOV, 19 77

WELL DRILLER'S STATEMENT:  
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.  
NAME WHIDBEY WELL DRILLERS  
(Person, firm, or corporation) (Type or print)  
Address OAK HARBOR W.N.  
[Signed] Dennis Fisher  
(Well Driller)  
License No. 129 Date NOV, 19 77



WASHINGTON STATE  
DEPARTMENT OF  
ECOLOGY

# Well Tagging Form

SOURCE #19, well #11

Unique Well Tag No A6A 887

## RECORD VERIFICATION (check one)

- ☐ Well Report available (please attach this form to the well report and submit it to the Ecology Regional Office near you)
- ☐ Verification inconclusive
- ☐ Well Report not available

## WELL OWNERSHIP, IF DIFFERENT FROM WELL REPORT

First Name CITY OF OAK HARBOR Last Name LOZUSO

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

## LOCATION OF WELL, IF DIFFERENT FROM WELL REPORT

Well Address ACROSS FROM 1265 SW BARRINGTON

City \_\_\_\_\_ County \_\_\_\_\_

T \_\_\_\_\_ N R \_\_\_\_\_ W M Sec \_\_\_\_\_ 1/4 of the \_\_\_\_\_

## FOR AGENCY USE ONLY

Latitude \_\_\_\_\_

Longitude \_\_\_\_\_

Elevation at land surface \_\_\_\_\_ feet/meters (circle one)

Additional information, if available

- ☐ Location marked on topographic map (please attach)
- ☐ Location marked on air photo (please attach)

- ☐ GPS
- ☐ Topographic Map
- ☐ Survey
- ☐ Computer generated

- ☐ Digital Altimeter
- ☐ Topographic Map
- ☐ Other \_\_\_\_\_

State Health

The Department of Ecology does NOT Warranty the Data and/or the Information on this Well Report.

FOR AGENCY USE ONLY

WELL CHARACTERISTICS

Physical Description of well (size or casing type of well housing etc.)

3" CASING - GREY PUMPHOUSE (~10'12) IN THE MIDDLE OF PARK  
ACROSS FROM 1205 SW BARRINGTON MADE OF UNDERBUNK W/ WOOD  
ROOF

Location or Well Identification Tag

CASINL

Is supplemental tag needed for ease of identifying well?

☐

Yes

☒

No

Where was tag placed?

Scale 1 24 000 (1" = 2 000')

Indicate the location of the well within the Section by drawing a dot at that point.

SECTION \_\_\_\_\_

D	C	B	A
E	F	G	H
I	L	K	J
M	P	Q	R

Comments

FOR ECOLOGY WATER RESOURCES PROGRAM ONLY

Permit Right #

Date Issued

Permit One

Application

Permit

Certificate

Claim

Exempt